

## **Application Data Sheet**

### **Application Information**

Application number::  
Filing Date:: 01/15/04  
Application Type:: Regular  
Subject Matter:: Utility  
Suggested classification::  
Suggested Group Art Unit::  
CD-ROM or CD-R?: None  
Number of CD disks::  
Number of copies of CDs::  
Sequence submission?:  
Computer Readable Form (CRF)?:  
Number of copies of CRF::  
Title:: FOLDING BAG CONSTRUCTION  
Attorney Docket Number:: 04286.00135  
Request for Early Publication?: NO  
Request for Non-Publication?: NO  
Suggested Drawing Figure::  
Total Drawing Sheets:: 4  
Small Entity?: YES  
Latin name::  
Variety denomination name::  
Petition included?: NO  
Petition Type::  
Licensed US Govt. Agency::  
Contract or Grant Numbers::  
Secrecy Order in Parent Appl.?: NO

## **Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Donald  
Middle Name:: E.  
Family Name:: Godshaw  
Name Suffix::  
City of Residence:: Evanston  
State or Province of Residence:: IL  
Country of Residence:: US  
Street of mailing address:: 3030 Payne Street  
City of mailing address:: Evanston  
State or Province of mailing address:: IL  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 60201

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Andrejz  
Middle Name:: M.  
Family Name:: Redzisz  
Name Suffix::  
City of Residence:: US  
State or Province of Residence:: Wheeling  
Country of Residence:: US  
Street of mailing address:: 636 Sycamore Lane  
City of mailing address:: Wheeling

State or Province of mailing address:: IL  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 60090

### **Correspondence Information**

Correspondence Customer Number:: 22908

### **Representative Information**

Representative Customer Number:: 22908

### **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::

### **Foreign Priority Information**

Country::	Application number::	Filing Date::	Priority Claimed::

### **Assignee Information**

Assignee name:: Travel Caddy, Inc. d/b/a Travelon  
Street of mailing address:: 333 E. Touhy Avenue  
City of mailing address:: Des Plaines  
State or Province of mailing address:: IL  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 60018